

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2006 8:00 am
Secretary of State

04-18-2006 90072 002 ***150.00

DOCUMENT # P97000100475

1. Entity Name
OCEAN LAND INVESTMENTS, INC.



Principal Place of Business Mailing Address
ONE SOUTH OCEAN BLVD ATTN: N BOYD **ONE SOUTH OCEAN BLVD ATTN: N BOYD**
SUITE 204 **SUITE 204**
BOCA RATON, FL 33432 US **POMPANO BEACH, FL 33432 US**

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State
Zip Country Zip Country



04052006 Chg-P CR2E034 (11/05)

4. FEI Number 65-0799630 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PHILLIPS, EISINGER, KOSS & ROSENFELDT, P.A
4000 HOLLYWOOD BLVD, SUITE 265-S
HOLLYWOOD, FL 33021

7. Name and Address of New Registered Agent

Name **EISINGER, BROWN, LEWIS & FRANKEL, P.A.**

Street Address (P.O. Box Number is Not Acceptable)

4000 Hollywood Boulevard, #265- South

City **Hollywood** **FL** Zip Code **33021**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Andrew I. Lewis* **Andrew I. Lewis, Esq., Sec'y** **4/5/06**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	ROY, JEAN F	
STREET ADDRESS	2902 N.W. BANYAN BLVD.	
CITY-ST-ZIP	BOCA RATON, FL 33431	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	MARTIN, PIERRE	
STREET ADDRESS	2268 N.W. 30TH RD.	
CITY-ST-ZIP	BOCA RATON, FL 33431	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JEAN FRANCOIS ROY	
STREET ADDRESS	2902 N.W. Banyan Blvd.	
CITY-ST-ZIP	Boca Raton, FL 33431	
TITLE	DVS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MARK ISSENMAN	
STREET ADDRESS	One South Ocean Blvd., #204	
CITY-ST-ZIP	Boca Raton, FL 33432	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Mark Isсенman* **MARK ISSENMAN, Secretary** **4/6/06** **561-416-2099**
Signature and typed or printed name of signing officer or director Date Daytime Phone #